

● PRINTER RUSH ●
(PTO ASSISTANCE)

Application : <u>10/625599</u>	Examiner : <u>Patterson M</u>	GAU : <u>3728</u>
From: <u>A. J. C.</u>	Location: <u>IDO</u> FMF FDC	Date: <u>3-3-5</u>
Tracking #: <u>0606 7718</u>		Week Date: <u>1-17-5</u>

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449		<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS		<input type="checkbox"/> Foreign Priority
<input checked="" type="checkbox"/> <u>CLM</u>	<u>11/29/2004</u>	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW		<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW		<input type="checkbox"/> Other
<input type="checkbox"/> DRW		
<input type="checkbox"/> OATH		
<input type="checkbox"/> 312		
<input type="checkbox"/> SPEC		

[RUSH] MESSAGE: Improper Dependency: Original claim 18 depends upon
canceled original claim 17. Please Resolve.

Thank you
LJC

[XRUSH] RESPONSE: _____

INITIALS:

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.
REV 10/04